## Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| SOUTHERN DISTRICT OF OHIO                       | _                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |   |   |
|-----|---|---|---|
|     |   | About Debtor 1:                                       | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |   |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Jaylen First name  D. Middle name                     | First name  Middle name                       |
|     | Bring your picture identification to your meeting with the trustee.   | Littlefield  Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | All other names you have used in the last 8 years   |   |   |
|     | Include your married or maiden names.   |   |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)         | xxx-xx-0334   |   |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 2 of 54 Case number (if known)

Debtor 1 Jaylen D. Littlefield

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)   |
|    |  | EINS  | EINs   |
| 5. | Where you live   | 7603 Maple Trunk Dr.<br>Canal Winchester, OH 43110  | If Debtor 2 lives at a different address:  |
|    |  | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |  | Franklin County   | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  | Check one:  Over the last 180 days before filing this petition. I  |
|    | Summapley  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |  |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 3 of 54

Debtor 1 Jaylen D. Littlefield

Case number (if known)

| 7.  | The chapter of the Bankruptcy Code you are   |   |                                  |   |   | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy  |  |
|-----|--|---|----------------------------------|---|---|---|--|
|     | Bankruptcy Code you are choosing to file under   | (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  ■ Chapter 7 |                                  |   |   |   |  |
|     | choosing to the under  |   |                                  |   |   |   |  |
|     |  | ☐ CI  | napter 11                        |   |   |   |  |
|     |  | ☐ CI  | napter 12                        |   |   |   |  |
|     |  | □ CI  | napter 13                        |   |   |   |  |
| 8.  | How you will pay the fee   |   | about how yo                     | u may pay. Typi<br>attorney is subn       | ically, if you are paying the fee yo                                    | k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with   |  |
|     |  |   |                                  |   | allments. If you choose this options (Official Form 103A).              | on, sign and attach the Application for Individuals to Pay  |  |
|     |  |   | but is not req<br>applies to you | uired to, waive y<br>ur family size an    | our fee, and may do so only if yo<br>d you are unable to pay the fee ir | n only if you are filing for Chapter 7. By law, a judge may,<br>ur income is less than 150% of the official poverty line that<br>n installments). If you choose this option, you must fill out<br>cial Form 103B) and file it with your petition. |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?   | ■ No  |                                  |   |   |   |  |
|     | last o years:  | ш те  | S.<br>District                   |   | When  | Case number   |  |
|     |  |   | District                         |   | When<br>When  | Case number Case number   |  |
|     |  |   | District                         |   | When  | Case number   |  |
| 10. | Are any bankruptcy   | ■ No  | )                                |   |   |   |  |
|     | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Ye  | S.                               |   |   |   |  |
|     |  |   | Debtor                           | -   |   | Relationship to you   |  |
|     |  |   | District                         |   | When  | Case number, if known   |  |
|     |  |   | Debtor                           |   |   | Relationship to you   |  |
|     |  |   | District                         |   | When  | Case number, if known   |  |
| 11. | Do you rent your residence?  | ■ No  | Go to I                          | ne 12.                                    |   |   |  |
|     | . John Children  | ☐ Ye  | s. Has yo                        | ur landlord obta                          | ined an eviction judgment agains  | t you?  |  |
|     |  |   |                                  | No. Go to line 1                          | 12.   |   |  |
|     |  |   |                                  | Yes. Fill out <i>Init</i> this bankruptcy |   | Judgment Against You (Form 101A) and file it as part of   |  |

|          |                       | DUCUITIETIL | raye 4 01 34           |  |
|----------|-----------------------|-------------|------------------------|--|
| Debtor 1 | Javlen D. Littlefield |             | Case number (if known) |  |

| art | 3: Report About Any Bu  | sinesses ` | You Own                     | as a Sole Proprietor                         | r   |
|-----|---|------------|-----------------------------|--|---|
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.      | Go to                       | Part 4.                                      |   |
|     |   | ☐ Yes.     | Name                        | and location of busine                       | ess   |
|     | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |            | Name                        | of business, if any                          |   |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |            | Numb                        | er, Street, City, State                      | & ZIP Code  |
|     | it to this petition.  |            | Check                       |  | to describe your business:  |
|     |   |            |                             | Health Care Busines                          | ss (as defined in 11 U.S.C. § 101(27A))   |
|     |   |            |                             | Single Asset Real E                          | state (as defined in 11 U.S.C. § 101(51B))  |
|     |   |            |                             | Stockbroker (as defi                         | ined in 11 U.S.C. § 101(53A))   |
|     |   |            |                             | Commodity Broker (                           | (as defined in 11 U.S.C. § 101(6))  |
|     |   |            |                             | None of the above                            |   |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines  | s. If you in<br>s, cash-flo | dicate that you are a sow statement, and fed | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure |
|     | For a definition of small   | ■ No.      | I am n                      | ot filing under Chapte                       | er 11.  |
|     | business debtor, see 11 U.S.C. § 101(51D).  | □ No.      | I am fi<br>Code.            | ing under Chapter 11                         | I, but I am NOT a small business debtor according to the definition in the Bankruptcy   |
|     |   | ☐ Yes.     | I am fi                     | ing under Chapter 11                         | I and I am a small business debtor according to the definition in the Bankruptcy Code.  |
| art | : 4: Report if You Own or   | Have Any   | Hazardo                     | us Property or Any F                         | Property That Needs Immediate Attention   |
| 14. | Do you own or have any  | ■ No.      |                             |  |   |
|     | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>identifiable hazard to  | ☐ Yes.     | What is t                   | he hazard?                                   |   |
|     | public health or safety? Or do you own any property that needs immediate attention?   |            |                             | ate attention is<br>why is it needed?        |   |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |            | Where is                    | the property?                                | Number, Street, City, State & Zip Code  |
|     |   |            |                             | IN.  | rumber, otreet, oity, otate a zip oode  |

Debtor 1 Jaylen D. Littlefield Document Page 5 of 54 Case number (if known)

Part 5:

## Explain Your Efforts to Receive a Briefing About Credit Counseling

## Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

## ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

| I received a briefing from an approved credit                         |
|---|
| counseling agency within the 180 days before I filed                  |
| this bankruptcy petition, and I received a certificate of completion. |
| •   |

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

## ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Jaylen D. Littlefield Page 6 of 54 Case number (if known)

| Par | 6: Answer These Questi   | ions for Re          | porting Purposes   |   |                                    |  |
|-----|--|----------------------|--|---|------------------------------------|--|
| 16. | What kind of debts do you have?                                | 16a.                 | Are your debts primarily consu individual primarily for a personal,          |   |                                    | C. § 101(8) as "incurred by an                 |
|     |  |                      | ☐ No. Go to line 16b.  |   |                                    |  |
|     |  |                      | Yes. Go to line 17.  |   |                                    |  |
|     |  | 16b.                 | Are your debts primarily busines money for a business or investme            |   |                                    |  |
|     |  |                      | ☐ No. Go to line 16c.  |   |                                    |  |
|     |  |                      | ☐ Yes. Go to line 17.  |   |                                    |  |
|     |  | 16c.                 | State the type of debts you owe the  | nat are not consumer debts or                                       | business debts                     |  |
| 17. | Are you filing under<br>Chapter 7?                             | □ No.                | I am not filing under Chapter 7. G   | o to line 18.   |                                    |  |
|     | Do you estimate that after any exempt property is excluded and | ■ Yes.               | I am filing under Chapter 7. Do yo are paid that funds will be availab       | ou estimate that after any exen<br>le to distribute to unsecured of | npt property is excluded reditors? | d and administrative expenses                  |
|     | administrative expenses are paid that funds will               |                      | ■ No   |   |                                    |  |
|     | be available for distribution to unsecured creditors?          |                      | ☐ Yes  |   |                                    |  |
| 18. | How many Creditors do  | <b>■</b> 1-49        |  | □ 1,000-5,000   | □ 25,00                            | 1-50.000                                       |
|     | you estimate that you owe?                                     | ☐ 50-99              |  | ☐ 5001-10,000   |                                    | 1-100,000                                      |
|     | OWC:   | <u> </u>             |  | □ 10,001-25,000   | ☐ More                             | than100,000                                    |
|     |  | 200-99               | <del>3</del> 9   |   |                                    |  |
| 19. | How much do you  | □ \$0 - \$ <u>\$</u> | 50,000   | □ \$1,000,001 - \$10 million  | □ \$500,                           | 000,001 - \$1 billion                          |
|     | estimate your assets to be worth?                              |                      | 01 - \$100,000   | □ \$10,000,001 - \$50 millio  |                                    | 0,000,001 - \$10 billion                       |
|     |  |                      | 001 - \$500,000<br>001 - \$1 million   | □ \$50,000,001 - \$100 million   □ \$100,000,001 - \$500 million    |                                    | 00,000,001 - \$50 billion<br>than \$50 billion |
| 20. | How much do you  | □ \$0 - \$ <u>\$</u> | 50,000   | □ \$1,000,001 - \$10 million  | □ \$500.                           | 000,001 - \$1 billion                          |
|     | estimate your liabilities to be?                               |                      | 01 - \$100,000   | □ \$10,000,001 - \$50 millio  | n 🗆 \$1,00                         | 00,000,001 - \$10 billion                      |
|     | to be:   |                      | 001 - \$500,000  | \$50,000,001 - \$100 million  | · ·                                | 000,000,001 - \$50 billion                     |
|     |  | <b>□</b> \$500,0     | 001 - \$1 million  | □ \$100,000,001 - \$500 mil   | lion 🗀 More                        | than \$50 billion                              |
| Par | 7: Sign Below  |                      |  |   |                                    |  |
| For | you  | I have ex            | amined this petition, and I declare  | under penalty of perjury that th                                    | ne information provided            | d is true and correct.                         |
|     |  |                      | chosen to file under Chapter 7, I an<br>ates Code. I understand the relief   |   |                                    |  |
|     |  |                      | ney represents me and I did not patt, I have obtained and read the not       |   |                                    | help me fill out this                          |
|     |  | I request            | relief in accordance with the chapt  | er of title 11, United States Co                                    | de, specified in this pe           | tition.  |
|     |  |                      | and making a false statement, conc<br>by case can result in fines up to \$2: |   |                                    |  |
|     |  | /s/ Jayle            | n D. Littlefield   | 0:  | f Dahtas O                         |  |
|     |  |                      | D. Littlefield<br>e of Debtor 1  | Signature o   | DEDTOR 2                           |  |
|     |  | Executed             | on December 22, 2018   | Executed of   | n                                  |  |
|     |  |                      | MM / DD / YYYY   |   | MM / DD / YYYY                     |  |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 7 of 54

Debtor 1 Jaylen D. Littlefield Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Ronald A      | A. Wittel, Jr.         | Date          | December 22, 2018  |
|-------------------|------------------------|---------------|--------------------|
| Signature of      | Attorney for Debtor    |               | MM / DD / YYYY     |
|                   |                        |               |                    |
| Ronald A. V       | Vittel, Jr. 0078689    |               |                    |
| Printed name      |                        |               |                    |
| Ronald A. V       | Vittel, Jr.            |               |                    |
| Firm name         |                        |               |                    |
| Attorney at       | Law                    |               |                    |
| 1141 South        | High St.               |               |                    |
| Columbus,         | OH 43206               |               |                    |
| Number, Street, C | City, State & ZIP Code |               |                    |
| Contact phone     | (614) 445-3000         | Email address | rwittel3@yahoo.com |
| 0078689 OI        | Н                      |               |                    |
| Bar number & Sta  | ate                    |               | <del></del>        |

Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Case 2:18-bk-57992

| <u> </u>               | 5 2.10 BK 01002          | Docum             |           | <br>Bood Main                      |
|------------------------|--------------------------|-------------------|-----------|------------------------------------|
| Fill in this infor     | mation to identify your  | case:             |           |                                    |
| Debtor 1               | Jaylen D. Littlefield    | d                 |           |                                    |
|                        | First Name               | Middle Name       | Last Name |                                    |
| Debtor 2               |                          |                   |           |                                    |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name |                                    |
| United States Ba       | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO   |                                    |
| Case number (if known) |                          |                   |           | Check if this is an amended filing |
| Official Ec            | orm 106Sum               |                   |           | <br>J                              |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

| Par        | Summarize Your Assets  |             |                           |
|------------|--|-------------|---------------------------|
|            |  |             | assets<br>of what you own |
| 1.         | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 161,200.00                |
|            | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 19,921.00                 |
|            | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 181,121.00                |
| Par        | t 2: Summarize Your Liabilities  |             |                           |
|            |  |             | liabilities<br>nt you owe |
| 2.         | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 208,949.12                |
| 3.         | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 0.00                      |
|            | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 25,789.35                 |
|            | Your total liabilities   | \$          | 234,738.47                |
| ⊃aı        | t 3: Summarize Your Income and Expenses  |             |                           |
| ١.         | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 2,773.18                  |
| j.         | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 3,755.00                  |
| Par        | 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| <b>S</b> . | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other so | chedules.                 |
| 7.         | ■ Yes What kind of debt do you have?   |             |                           |
|            | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for   |             | I. Cama'lla an            |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Page 9 of 54 Case number (if known) Document

Debtor 1 Jaylen D. Littlefield

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 3,905.25 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tot  | al claim  |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |      |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_  | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_  | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 14,054.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 14,054.00 |

# Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 10 of 54

| Fill               | in this inform             | nation to identify you                         | r casa:   |   |  |   |
|--------------------|----------------------------|--|---|---|--|---|
|                    |                            |  |   |   |  |   |
| Dei                | otor 1                     | Jaylen D. Littlefie                            | Middle Name   | Last Name   |  |   |
|                    | otor 2<br>ouse if, filing) | First Name                                     | Middle Name   | Last Name   |  |   |
| Uni                | ted States Ba              | nkruptcy Court for the:                        | SOUTHERN DISTRICT (   | OF OHIO   |  |   |
| Cas                | se number                  |  |   |   |  |   |
| (if kr             | nown)                      |  |   |   |  | Check if this is an mended filing                     |
|                    |                            |  |   |   |  |   |
|                    | ficial Fo                  |  |   |   |  |   |
| Sta                | atement                    | of Financial                                   | Affairs for Individ   | duals Filing for B                                    | ankruptcy  | 4/16  |
| info<br>num        | rmation. If m              | nore space is needed,<br>n). Answer every ques | attach a separate sheet to  | this form. On the top of any                          | equally responsible for sup<br>additional pages, write you     |   |
| 1.                 |                            | r current marital statu                        |   | Liveu Belore  |  |   |
|                    | ☐ Married                  |  |   |   |  |   |
|                    | ■ Not mai                  |  |   |   |  |   |
| 2.                 | During the I               | ast 3 years, have you                          | lived anywhere other than   | where you live now?                                   |  |   |
|                    | ■ No □ Yes. Lis            | et all of the places you I                     | ived in the last 3 years. Do no   | ot include where you live now                         | <i>'</i> .   |   |
|                    | Debtor 1 Pr                | ior Address:                                   | Dates Debtor 1 lived there  | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>state |                            |  |   |   | ity property state or territory<br>co, Texas, Washington and W |   |
|                    | ■ No                       |  |   |   |  |   |
|                    | ☐ Yes. Ma                  | ake sure you fill out <i>Sch</i>               | hedule H: Your Codebtors (O   | fficial Form 106H).                                   |  |   |
| Par                | t 2 Explai                 | in the Sources of You                          | r Income  |   |  |   |
| 4.                 | Fill in the tota           | al amount of income yo                         | nployment or from operatin<br>u received from all jobs and a<br>have income that you receiv | all businesses, including part-                       |  | ndar years?   |
|                    | □ No                       |  |   |   |  |   |
|                    | Yes. Fil                   | I in the details.                              |   |   |  |   |
|                    |                            |  | Debtor 1  |   | Debtor 2   |   |
|                    |                            |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |
|                    |                            | of current year until<br>d for bankruptcy:     | ■ Wages, commissions, bonuses, tips   | \$6,792.44  | ☐ Wages, commissions, bonuses, tips                            |   |
|                    |                            |  | ☐ Operating a business  |   | ☐ Operating a business   |   |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Page 11 of 54
Case number (if known) Document

Debtor 1 Jaylen D. Littlefield

|  | Debtor 1                                      |  | Debtor 2                                   |   |
|--|---|--|--|---|
|  | Sources of income<br>Check all that apply.    | <b>Gross income</b> (before deductions and exclusions) | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |
| For last calendar year:<br>(January 1 to December 31, 2017)          | ■ Wages, commissions, bonuses, tips           | \$16,000.00  |  |   |
|  | ☐ Operating a business                        |  | ☐ Operating a business                     |   |
| For the calendar year before that: (January 1 to December 31, 2016 ) | ■ Wages, commissions, \$22,000. bonuses, tips |  | ☐ Wages, commissions, bonuses, tips        |   |
|  | ☐ Operating a business                        |  | Operating a business                       |   |

#### Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony, child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

|   | Debtor 1                             |  | Debtor 2                             |   |
|---|--------------------------------------|--|--------------------------------------|---|
|   | Sources of income<br>Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income<br>Describe below. | Gross income<br>(before deductions<br>and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Retirement Cash In                   | \$8,231.33   |                                      |   |
|   | Military Disability                  | \$23,192.16  |                                      |   |
|   | GI Bill                              | \$10,086.00  |                                      |   |
| For last calendar year:<br>(January 1 to December 31, 2017)             | Military Disability                  | \$23,192.16  |                                      |   |
| For the calendar year before that: (January 1 to December 31, 2016 )    | Military Disability                  | \$23,192.16  |                                      |   |
|   |                                      |  |                                      |   |

## Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

| <ol><li>Are either Debtor 1's or Debtor 2's debts primarily consu</li></ol> | umer debts? |
|---|-------------|
|---|-------------|

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

 $\square$  No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

<sup>\*</sup> Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Nature of the case Status of the case Case title Court or agency Case number Akeeyla Littlefield v. Jaylen Littlefield Dissolution Franklin County Court of □ Pending 17DR000176 Common Pleas □ On appeal **Domestic Relations Division** Concluded 373 S. High St., 4th Fl. Columbus, OH 43215 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 

Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main

Case number (if known)

Page 12 of 54

Case 2:18-bk-57992

Jaylen D. Littlefield

Debtor 1

Doc 1

Document

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Page 13 of 54 Case number (if known) Document Debtor 1 Jaylen D. Littlefield 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 2018 \$750.00 Ronald A. Wittel, Jr. Attorney Fees Attorney at Law 1141 South High St. Columbus, OH 43206

rwittel3@yahoo.com Ronald Wittel Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 14 of 54 Case number (if known)

Debtor 1 Jaylen D. Littlefield

|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You  | Description and value of any transferred                                      | property             | Date payment or transfer was made                  | Amount of<br>payment                          |
|-----|--|---|----------------------|--|---|
|     | Debtorcc.org www.bothcourses.com Credit Counseling Company   | 1st Credit Counseling Cours   | se                   | 2018   | \$14.99                                       |
| 17. | Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you list   | r to make payments to your cre  |                      | r transfer any propert                             | y to anyone who                               |
|     | ■ No □ Yes. Fill in the details.   |   |                      |  |   |
|     | Person Who Was Paid<br>Address   | Description and value of any transferred                                      | property             | Date payment or transfer was made                  | Amount of<br>payment                          |
|     | Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis  No  Yes. Fill in the details. | ness or financial affairs?<br>as security (such as the granting of            |                      |  |   |
|     | Person Who Received Transfer Address  Person's relationship to you   | Description and value of property transferred                                 |                      | nny property or<br>received or debts<br>change     | Date transfer was made                        |
|     | Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.   |   | o a self-settled tru | st or similar device o                             | f which you are a                             |
|     | Name of trust  | Description and value of the  | property transferre  | ed   | Date Transfer was made                        |
| Par | t 8: List of Certain Financial Accounts, Instru  | ments, Safe Deposit Boxes, and  | l Storage Units      |  | au  |
| 20. | Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or ot houses, pension funds, cooperatives, associati  No  Yes. Fill in the details.                               | her financial accounts; certifica   | ites of deposit; sh  | •  |   |
|     |  | st 4 digits of Type of account number instrumen                               | t clo<br>mo          | e account was<br>sed, sold,<br>ved, or<br>nsferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables?   | before you filed for bankruptcy   | , any safe deposit   | box or other deposit                               | ory for securities,                           |
|     | ■ No □ Yes. Fill in the details.   |   |                      |  |   |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the         | contents   | Do you still have it?                         |
|     |  | •   |                      |  |   |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 15 of 54 Case number (if known)

Debtor 1 Jaylen D. Littlefield

| 22.         | Have you stored property in a storage unit or p   | lace other than your home within 1   | year before you filed for bankruptcy  | ?                     |
|-------------|---|--|---------------------------------------|-----------------------|
|             | ■ No  |  |                                       |                       |
|             | Yes. Fill in the details.   |  |                                       |                       |
|             | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents                 | Do you still have it? |
| Pai         | 19: Identify Property You Hold or Control for   | ,  |                                       |                       |
| 22          | Do you hold as control any memority that comes  | ana alaa ayyaa2 laabida aay araanaa  | turner have und from one staving for  | hald in tweet         |
| 23.         | Do you hold or control any property that some for someone.  | one else owns? include any proper  | ty you borrowed from, are storing for | , or noid in trust    |
|             | ■ No  |  |                                       |                       |
|             | Yes. Fill in the details.   |  |                                       |                       |
|             | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)              | Describe the property                 | Value                 |
| Pai         | t 10: Give Details About Environmental Inform   | ,  |                                       |                       |
|             |   |  |                                       |                       |
| For         | the purpose of Part 10, the following definitions   | apply:   |                                       |                       |
|             | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | ir, land, soil, surface water, ground  | <del>-</del> •                        |                       |
|             | Site means any location, facility, or property as to own, operate, or utilize it, including disposal  | -  | law, whether you now own, operate, o  | or utilize it or used |
|             | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or   |  | s waste, hazardous substance, toxic s | substance,            |
| Pan         | ort all notices, releases, and proceedings that y   | ou know about regardless of when   | they occurred                         |                       |
| ·           |   | , 5  | •                                     |                       |
| 24.         | Has any governmental unit notified you that yo  | u may be liable or potentially liable  | under or in violation of an environme | ental law?            |
|             | ■ No  |  |                                       |                       |
|             | Yes. Fill in the details.   |  |                                       |                       |
|             | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)                 | Environmental law, if you know it     | Date of notice        |
| 25.         | Have you notified any governmental unit of any  | ,  |                                       |                       |
|             | ■ No  |  |                                       |                       |
|             | ■ No □ Yes. Fill in the details.  |  |                                       |                       |
|             | Name of site  | Governmental unit  | Environmental law, if you             | Date of notice        |
|             | Address (Number, Street, City, State and ZIP Code)  | Address (Number, Street, City, State and ZIP Code)                                   |                                       | Date of notice        |
| 26.         | Have you been a party in any judicial or admini   | strative proceeding under any envi   | ronmental law? Include settlements a  | and orders.           |
|             | ■ No  |  |                                       |                       |
|             | Yes. Fill in the details.   |  |                                       |                       |
|             | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)              | Nature of the case                    | Status of the case    |
| Pa          | 11: Give Details About Your Business or Cor   | ,  |                                       |                       |
| 27          | Within 4 years before you filed for hankrunter  | did you own a business or boye or  | ny of the following connections to an | / husiness?           |
| <b>LI</b> . | Within 4 years before you filed for bankruptcy,  ☐ A sole proprietor or self-employed in a  | •  |                                       | , nasiliess (         |
|             | ☐ A member of a limited liability company   | (LLC) or limited liability partnersh   | ip (LLP)                              |                       |
|             |   |  |                                       |                       |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Page 16 of 54 Document ase number (if known) Debtor 1 Jaylen D. Littlefield ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jaylen D. Littlefield Signature of Debtor 2 Javlen D. Littlefield Signature of Debtor 1 Date December 22, 2018 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

|                                       | Case 2:18-1  |                      |                            | Doci         |  |  |  |   |   |
|---------------------------------------|--|----------------------|----------------------------|--------------|--|--|--|---|---|
| -ill ir                               | n this information to  | identify             | your case and th           |              |  | Page 17 of 54  |  |   |   |
| Debto                                 | or 1 Jayle   | n D. Littl           | efield                     |              |  |  |  |   |   |
|                                       | First Na   | ne                   | Middle                     | e Name       |  | Last Name  |  |   |   |
| Debto<br>Spous                        | or 2<br>se, if filing) First Na  | ne                   | Middle                     | e Name       |  | Last Name  |  |   |   |
| Jnite                                 | d States Bankruptcy  | Court for            | the: SOUTHER               | N DISTR      | RICT OF OHIO   | O  |  |   |   |
| 2000                                  | numbor   |                      | -                          |              |  |  |  |   |   |
| Jase                                  | number   |                      |                            |              |  | _  |  |   | Check if this is a amended filing   |
| SC<br>n each                          | t fits best. Be as comp  | 3: Pr                | operty escribe items. List | le. If two r | married people   | an asset fits in more than o<br>e are filing together, both a<br>e top of any additional pag   | re equally respo   | nsible for su   | pplying correct   |
| nswe<br>Part 1                        | er every question.  Describe Each Resi   | dence. Bı            | ilding. Land. or Ot        | ther Real I  | Estate You Ow  | vn or Have an Interest In  |  |   |   |
| _                                     | you own or have any le   | gai or eq            | uitable interest in a      | any reside   | ence, building,  | land, or similar property?   |  |   |   |
| .1                                    |  | rty?<br>Dr.          |                            | What i       |  | 1? Check all that apply  | the amount of  | of any secure   | aims or exemptions. Put<br>d claims on Schedule D:  |
| .1                                    | No. Go to Part 2. Yes. Where is the prope  | rty?<br>Dr.          |                            | What i       | is the property Single-family h Duplex or mult Condominium Manufactured  | 1? Check all that apply  | the amount of Creditors Wh   | of any secure<br>tho Have Clair<br>ue of the  | d claims on Schedule D:<br>ms Secured by Property.  Current value of the  |
| N   N   N   N   N   N   N   N   N   N | No. Go to Part 2.  Yes. Where is the prope  7603 Maple Trunk  Street address, if available, o                                    | Dr.                  | ription                    | What i       | is the property<br>Single-family h<br>Duplex or mult<br>Condominium  | 1? Check all that apply nome ti-unit building or cooperative or mobile home  | Current valuentire prope   | of any secure<br>tho Have Clair<br>ue of the  | d claims on Schedule D:<br>ms Secured by Property.  |
| .1                                    | No. Go to Part 2.  Yes. Where is the prope  7603 Maple Trunk  Street address, if available, of                                   | Dr.<br>or other desc | eription 43110-0000        | What         | is the property Single-family h Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other  | 1? Check all that apply nome ti-unit building or cooperative or mobile home  | Current valuentire proper \$161  | of any secure to Have Clair use of the lefty? 1,200.00 e nature of ye simple, ten ), if known.                                  | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  |
| .1                                    | No. Go to Part 2.  Yes. Where is the prope  7603 Maple Trunk  Street address, if available, of                                   | Dr.<br>or other desc | eription 43110-0000        | What         | is the property Single-family h Duplex or mult Condominium  Manufactured Land Investment pro Timeshare Other has an interest   | 1? Check all that apply nome ti-unit building or cooperative or mobile home  | Current valuentire prope \$161  Describe the (such as fee a life estate)           | of any secure to Have Clair use of the lefty? 1,200.00 e nature of ye simple, ten ), if known.                                  | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$161,200.00   |
| .1                                    | No. Go to Part 2.  Yes. Where is the prope  7603 Maple Trunk  Street address, if available, of  Canal Winchester  City           | Dr.<br>or other desc | eription 43110-0000        | What         | is the property Single-family I Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and I At least one of | 7? Check all that apply nome ti-unit building or cooperative or mobile home operty : in the property? Check one Debtor 2 only f the debtors and another                              | Current valuentire prope \$161  Describe the (such as fee a life estate) Fee Simpl | of any secure the Have Clair  ue of the erty?  1,200.00  e nature of y e simple, ten ), if known.  le  if this is com- uctions) | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$161,200.00   |
| 1.1                                   | No. Go to Part 2.  Yes. Where is the prope  7603 Maple Trunk  Street address, if available, of  Canal Winchester  City  Franklin | Dr.<br>or other desc | eription 43110-0000        | What         | is the property Single-family I Duplex or mult Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and I At least one of | /? Check all that apply nome ti-unit building or cooperative or mobile home operty : in the property? Check one Debtor 2 only f the debtors and another ou wish to add about this if | Current valuentire prope \$161  Describe the (such as fee a life estate) Fee Simpl | of any secure the Have Clair  ue of the erty?  1,200.00  e nature of y e simple, ten ), if known.  le  if this is com- uctions) | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$161,200.0  rour ownership interest ancy by the entireties, o |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Mair Document Page 18 of 54

Debtor 1 Jaylen D. Littlefield 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Lincoln Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: MKS Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2013 Year: Debtor 2 only Current value of the Current value of the 80,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Needs Repairs of \$11,775.00 \$11,775.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Buick Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Verano Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2014 Debtor 2 only Current value of the Current value of the 73,000 Approximate mileage: ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Needs repairs of rear view mirror \$7,325.00 \$7,325.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$19,100.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Π Nο Yes. Describe..... Household Goods and Furnishings \$600.00 Debtor's Possession 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe.....

Official Form 106A/B Schedule A/B: Property

page 2

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 19 of 54 Case number (if known)

| <ol> <li>Equipment for sports and hobbies         Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments     </li> </ol>                    | and kayaks; carpentry tools;  |
|---|---|
| ■ No  |   |
| ☐ Yes. Describe   |   |
| 10. Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  ■ No  |   |
| ☐ Yes. Describe   |   |
| <ul><li>11. Clothes</li><li>Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories</li><li>□ No</li></ul>   |   |
| Yes. Describe   |   |
| Clothing<br>Debtor's Possession   | \$200.00  |
| <ul> <li>12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, No □ Yes. Describe</li> </ul>   | gold, silver  |
| 13. Non-farm animals  Examples: Dogs, cats, birds, horses  ■ No □ Yes. Describe   |   |
| 14. Any other personal and household items you did not already list, including any health aids you did not list  ■ No  □ Yes. Give specific information   |   |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here   | \$800.00  |
| Part 4: Describe Your Financial Assets  |   |
| Do you own or have any legal or equitable interest in any of the following?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petit  □ No  ■ Yes   | tion  |
| Cash on Hand<br>Debtor's<br>Possession  | \$1.00  |
| 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage institutions. If you have multiple accounts with the same institution, list each. | houses, and other similar   |
| □ No ■ Yes Institution name:  |   |
| Navy Fed. CU  17.1. Checking  -Negative \$78 balance  | \$0.00  |

Official Form 106A/B

Debtor 1

page 3

Filed 12/22/18 Entered 12/22/18 11:31:23 Case 2:18-bk-57992 Doc 1 Page 20 of 54
Case number (if known) Document Debtor 1 Jaylen D. Littlefield U.S. Bank \$20.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: VA **VA Pension** Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

 $\hfill \square$  Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

|                 | Case 2:18-bk-57992   | Doc 1                        | Filed 12/22/18                                     | 8 Entered 12/22/18 11:31:23                      | 3 Desc Main              |
|-----------------|--|------------------------------|--|--|--------------------------|
| Debto           | r 1Jaylen D. Littlefield   |                              | Document I   | Page 21 of 54  Case number (if known)            |                          |
|                 | x refunds owed to you  |                              |  |  |                          |
| ■ N             | •  | ut them includ               | ding whether you alread                            | dy filed the returns and the tax years           |                          |
| _               | res. Sive spessio illiomation ass  | at triorii, morat            | ang whomer you are at                              | ay mod the returns and the tax years             |                          |
| 29. <b>Fa</b>   | mily support   |                              |  |  |                          |
| <i>E</i> >      | •  | mony, spousa                 | al support, child support                          | t, maintenance, divorce settlement, property     | settlement               |
| -               | Yes. Give specific information   |                              |  |  |                          |
|                 |  |                              |  |  |                          |
|                 | her amounts someone owes you<br>kamples: Unpaid wages, disability  |                              | ments, disability benef                            | its, sick pay, vacation pay, workers' comper     | nsation, Social Security |
|                 | benefits; unpaid loans yo  |                              |  |  | •                        |
|                 | Yes. Give specific information   |                              |  |  |                          |
|                 |  | Tax Refu                     | nd   |  |                          |
|                 |  | -Debtor w                    | vill owe taxes. He has                             | sn't filed his taxes for 2017. He                |                          |
|                 |  |                              | d all tax transcripts fo<br>W2s to file his taxes. | or the last 2 years. He is trying to get         | \$0.00                   |
|                 |  |                              |  | <u> </u>   |                          |
|                 | erests in insurance policies   | nsurance: hea                | Ith savings account (H                             | SA); credit, homeowner's, or renter's insurar    | nce                      |
|                 | No   |                              |  | - <b>,,</b> ,                                    |                          |
|                 | Yes. Name the insurance company<br>Compa   | y of each polic<br>iny name: | ey and list its value.                             | Beneficiary:                                     | Surrender or refund      |
|                 | ·  | •                            |  | ,  | value:                   |
|                 |  | surance (Th                  | rough Military)                                    |  |                          |
|                 | Term<br>No Ca  | sh Surrende                  | r Value  | Dad  | Unknown                  |
|                 |  |                              |  |  |                          |
|                 | y interest in property that is due   |                              |  | urance policy, or are currently entitled to rece | eive property because    |
| so              | meone has died.  |                              |  | ,  | and brokers, accounts    |
| ■ N             | No Yes. Give specific information  |                              |  |  |                          |
|                 |  |                              |  |  |                          |
|                 | aims against third parties, whetled<br>kamples: Accidents, employment of the common of |                              |  | or made a demand for payment o sue               |                          |
| <b>■</b> 1      |  |                              |  |  |                          |
|                 | Yes. Describe each claim   |                              |  |  |                          |
| 34. <b>Ot</b> l | •  | claims of ev                 | ery nature, including                              | counterclaims of the debtor and rights to        | set off claims           |
| -               | Yes. Describe each claim   |                              |  |  |                          |
| 35. <b>An</b>   | y financial assets you did not a   | ready list                   |  |  |                          |
| <b>■</b> 1      |  |                              |  |  |                          |
| ЦΥ              | Yes. Give specific information   |                              |  |  |                          |
|                 | -  |                              |  | entries for pages you have attached              | \$21.00                  |
| 10              | or Part 4. Write that number here  | <del>2</del>                 |  |  | Ψ21.00                   |
| Part 5:         | Describe Any Business-Related Pr   | operty You Ov                | n or Have an Interest In.                          | List any real estate in Part 1.                  |                          |
|                 | you own or have any legal or equital   | ble interest in a            | any business-related pro                           | perty?   |                          |
| _               | o. Go to Part 6.   |                              |  |  |                          |
|                 | es. Go to line 38.   |                              |  |  |                          |

Page 22 of 54
Case number (if known) Debtor 1 Jaylen D. Littlefield Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$161,200.00 Part 2: Total vehicles, line 5 \$19,100.00 57. Part 3: Total personal and household items, line 15 \$800.00 Part 4: Total financial assets, line 36 \$21.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

\$19,921.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$19,921.00

\$181,121.00

| Fill in this infor  | rmation to identify your | case:             |           |  |
|---------------------|--------------------------|-------------------|-----------|--|
| Debtor 1            | Jaylen D. Littlefield    | <u></u>           |           |  |
|                     | First Name               | Middle Name       | Last Name |  |
| Debtor 2            |                          |                   |           |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name |  |
| United States B     | ankruptcy Court for the: | SOUTHERN DISTRICT | OF OHIO   |  |
| Case number         |                          |                   |           |  |
| (if known)          |                          |                   |           |  |
|                     |                          |                   |           |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amou | unt of the exemption you claim                                  | Specific laws that allow exemption        |
|--|--------------------------------------|------|---|---|
|  | Copy the value from<br>Schedule A/B  | Chec | k only one box for each exemption.                              |   |
| 7603 Maple Trunk Dr. Canal<br>Winchester, OH 43110 Franklin County                     | \$161,200.00                         | •    | \$136,925.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(1)    |
| FMV based on County Auditor Line from <i>Schedule A/B</i> : 1.1                        |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2020.00((1)(1)                            |
| 2014 Buick Verano 73,000 miles<br>Needs repairs of rear view mirror                    | \$7,325.00                           |      | \$3,775.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(2)    |
| Line from Schedule A/B: 3.2  |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2323.00(1)(2)                             |
| Household Goods and Furnishings Debtor's Possession                                    | \$600.00                             |      | \$600.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |
| Line from <i>Schedule A/B</i> : 6.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2020.00((1)(1)(u)                         |
| Clothing Debtor's Possession   | \$200.00                             |      | \$200.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |
| Line from Schedule A/B: 11.1   |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2020.00((1)(4)(4)                         |
| Cash on Hand<br>Debtor's Possession  | \$1.00                               |      | \$0.00  | Ohio Rev. Code Ann. § 2329.66(A)(3)       |
| Line from <i>Schedule A/B</i> : 16.1   |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2323.00(A)(3)                             |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 24 of 54

Jaylen D. Littlefield Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking: Navy Fed. CU Ohio Rev. Code Ann. § \$0.00 -Negative \$78 balance 2329.66(A)(3) Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: U.S. Bank Ohio Rev. Code Ann. § \$20.00 \$20.00 2329.66(A)(3) Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit VA: VA Pension Ohio Rev. Code Ann. § 100% Unknown Line from Schedule A/B: 21.1 2329.66(A)(10)(b) 100% of fair market value, up to any applicable statutory limit VA: VA Pension 29 U.S.C.A. § 1056(d) Unknown Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit VA: VA Pension 10 U.S.C. § 1440 100% Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Tax Refund Ohio Rev. Code Ann. \$0.00 100% -Debtor will owe taxes. He hasn't filed §2329.66(A)(9)(g) his taxes for 2017. He requested all tax 100% of fair market value, up to transcripts for the last 2 years. He is any applicable statutory limit trying to get his 2017 W2s to file his taxes. Line from Schedule A/B: 30.1 Tax Refund Ohio Rev. Code Ann. § \$455.00 \$0.00 2329.66(A)(3) -Debtor will owe taxes. He hasn't filed his taxes for 2017. He requested all tax 100% of fair market value, up to transcripts for the last 2 years. He is any applicable statutory limit trying to get his 2017 W2s to file his taxes Line from Schedule A/B: 30.1 Tax Refund Ohio Rev. Code Ann. § \$0.00 \$1,250.00 -Debtor will owe taxes. He hasn't filed 2329.66(A)(18) his taxes for 2017. He requested all tax 100% of fair market value, up to transcripts for the last 2 years. He is any applicable statutory limit trying to get his 2017 W2s to file his taxes. Line from Schedule A/B: 30.1 Life Insurance (Through Military) Ohio Rev. Code Ann. §§ Unknown Unknown 2329.66(A)(6)(c), 3917.05 Term No Cash Surrender Value 100% of fair market value, up to Beneficiary: Dad any applicable statutory limit Line from Schedule A/B: 31.1

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 25 of 54

| Del | btor 1 Jaylen D. Littlefield  | Boodinent                            | Case number (if known)   |  |  |  |  |  |
|-----|---|--------------------------------------|--|--|--|--|--|--|
|     | Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own | Amount of the exemption you claim Specific laws that allow exemption   |  |  |  |  |  |
|     |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.   |  |  |  |  |  |
|     | Life Insurance (Through Military) Term  | Unknown                              | Unknown Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10,  |  |  |  |  |  |
|     | No Cash Surrender Value Beneficiary: Dad Line from Schedule A/B: 31.1   |                                      | 100% of fair market value, up to any applicable statutory limit  2323.00(r)(0)(0), 3371.10, 3911.12, 3911.14 |  |  |  |  |  |
|     | No Cash Surrender Value<br>Beneficiary: Dad   |                                      | ☐ 100% of fair market value, up to 3911.12, 3911.14  |  |  |  |  |  |
| 3.  | Are you claiming a homestead exemption of more than \$160,375?  (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)  No |                                      |  |  |  |  |  |  |
|     | ☐ Yes. Did you acquire the property cove☐ No  | ered by the exemption wi             | thin 1,215 days before you filed this case?  |  |  |  |  |  |
|     | Π Voc   |                                      |  |  |  |  |  |  |

|  | Document Pa  | age 26 of 54                  |  |                                   |
|--|--|-------------------------------|--|-----------------------------------|
| Fill in this information to identify you                               | ır case:   |                               |  |                                   |
| Debtor 1 _ Jaylen D. Littlefie   | eld  |                               |  |                                   |
| First Name   | Middle Name Las  | t Name                        |  |                                   |
| Debtor 2 (Spouse if, filing) First Name                                | Middle Name Las  | t Name                        | -  |                                   |
| United States Bankruptcy Court for the                                 | SOUTHERN DISTRICT OF OHIO  |                               | _  |                                   |
| Case number  |  |                               |  | if this is an<br>led filing       |
|  |  |                               | amend  | ied illing                        |
| Official Form 106D   |  |                               |  |                                   |
| Schedule D: Creditors  | Who Have Claims Se   | cured by Propert              | :y   | 12/15                             |
|  | If two married people are filing together, bo<br>out, number the entries, and attach it to thi   |                               |  |                                   |
| 1. Do any creditors have claims secured by                             | y your property?   |                               |  |                                   |
| ☐ No. Check this box and submit t                                      | his form to the court with your other sche   | edules. You have nothing else | to report on this form.                                |                                   |
| Yes. Fill in all of the information                                    | below.   |                               |  |                                   |
| Part 1: List All Secured Claims  |  |                               |  |                                   |
|  | more than one secured claim, list the creditors is a particular claim, list the other creditors in Pacal order according to the creditor's name. |                               | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Navy Federal C.U.  | Describe the property that secures the cl  | laim: \$16,269.00             | \$11,775.00  | \$4,494.00                        |
| Creditor's Name  | 2013 Lincoln MKS 80,000 miles<br>Needs Repairs of  |                               |  |                                   |
| 1 Security Pl.<br>Merrifield, VA 22116                                 | As of the date you file, the claim is: Check apply.  Contingent  | all that                      |  |                                   |
| Number, Street, City, State & Zip Code                                 | ☐ Unliquidated   |                               |  |                                   |
| Who owes the debt? Check one.  | ☐ Disputed  Nature of lien. Check all that apply.  |                               |  |                                   |
| ■ Debtor 1 only □ Debtor 2 only  | An agreement you made (such as mortg car loan)   | age or secured                |  |                                   |
| Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic   | c's lien)                     |  |                                   |
| ☐ At least one of the debtors and another                              | ☐ Judgment lien from a lawsuit   | , o,                          |  |                                   |
| ☐ Check if this claim relates to a community debt                      | Other (including a right to offset)  |                               |  |                                   |
| Date debt was incurred 2016  | Last 4 digits of account number  | 0334                          |  |                                   |
| 2010   |  |                               |  |                                   |
| 2.2 Navy Federal C.U.  | Describe the property that secures the cl  | laim: \$16,866.00             | \$7,325.00   | \$9,541.00                        |
| Creditor's Name  | 2014 Buick Verano 73,000 miles<br>Needs repairs of rear view mirror  |                               |  |                                   |
| 1 Security Pl.   | As of the date you file, the claim is: Check apply.  | all that                      |  |                                   |
| Merrifield, VA 22116   | ☐ Contingent   |                               |  |                                   |
| Number, Street, City, State & Zip Code                                 | ☐ Unliquidated   |                               |  |                                   |
| Who owes the debt? Check one.  | ☐ Disputed  Nature of lien. Check all that apply.  |                               |  |                                   |
| ■ Debtor 1 only  | ☐ An agreement you made (such as mortg car loan)   | age or secured                |  |                                   |
| Debtor 2 only  |  | o'a lian)                     |  |                                   |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Statutory lien (such as tax lien, mechanic☐ Judgment lien from a lawsuit   | Jo ⊪e∏                        |  |                                   |
| ☐ Check if this claim relates to a community debt                      | _  | Loan                          |  |                                   |
| Date debt was incurred 2015  | Last 4 digits of account number  | 0334                          |  |                                   |

# Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 27 of 54

| Debtor 1 Jaylen D. Littlefield                                     |  | Case number (if known) |              |             |  |  |  |
|--|--|------------------------|--------------|-------------|--|--|--|
| First Name Middle N  | ame Last Name  |                        |              |             |  |  |  |
| 2.3 Village Capital Investments                                    | Describe the property that secures the claim:  | \$175,814.12           | \$161,200.00 | \$14,614.12 |  |  |  |
| Creditor's Name  1 Corporate Dr. 360 Lake Zurich, IL 60047         | 7603 Maple Trunk Dr. Canal Winchester, OH 43110 Franklin County FMV based on County Auditor As of the date you file, the claim is: Check all that apply.  □ Contingent |                        |              |             |  |  |  |
| Number, Street, City, State & Zip Code                             | ☐ Unliquidated ☐ Disputed  |                        |              |             |  |  |  |
| Who owes the debt? Check one.                                      | Nature of lien. Check all that apply.  |                        |              |             |  |  |  |
| ■ Debtor 1 only □ Debtor 2 only                                    | ☐ An agreement you made (such as mortgage or car loan)   | r secured              |              |             |  |  |  |
| Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic's lien  | n)                     |              |             |  |  |  |
| ☐ At least one of the debtors and another                          | ☐ Judgment lien from a lawsuit   |                        |              |             |  |  |  |
| ☐ Check if this claim relates to a community debt                  | Other (including a right to offset)  1st Mort  | gage                   |              |             |  |  |  |
| Date debt was incurred 2017  | Last 4 digits of account number 671  | 12                     |              |             |  |  |  |
| Add the dollar value of your entries in C                          | Column A on this page. Write that number here:   | \$208,949.             | 12           |             |  |  |  |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages.  | \$208,949.             |              |             |  |  |  |

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|  |   | Document   | Page  | 28 of 5                                     | 54  |   |   |  |
|--|---|--|---|---|---|---|---|--|
| Fill in this inform  | nation to identify your ca  | ase:   |   |   |   |   |   |  |
| Debtor 1   | Jaylen D. Littlefield   |  |   |   |   |   |   |  |
|  | First Name  | Middle Name  | Last Nam  | е   |   |   |   |  |
| Debtor 2<br>(Spouse if, filing)                              | First Name  | Middle Name  | Last Nam  | e   |   |   |   |  |
|  |   |  |   |   |   |   |   |  |
| United States Bar  | nkruptcy Court for the:   | SOUTHERN DISTRICT OF (   | OHIO  |   |   |   |   |  |
| Case number  |   |  |   |   |   |   |   |  |
| (if known)   |   |  |   |   |   |   | Check                                   | if this is an  |
|  |   |  |   |   |   |   | amend                                   | ed filing  |
| Official Form  | 106E/F  |  |   |   |   |   |   |  |
|  |   | no Have Unsecure   | d Claim   | <b>e</b>                                    |   |   |   | 12/15  |
| any executory control Schedule G: Execut Schedule D: Credito | racts or unexpired leases to<br>tory Contracts and Unexpirors Who Have Claims Secutinuation Page to this page | Part 1 for creditors with PRIOR hat could result in a claim. Also ed Leases (Official Form 106G), red by Property. If more space i . If you have no information to r | o list executo<br>. Do not inclus<br>s needed, co | ory contract<br>ude any cre<br>opy the Part | s on Schedule A/B: P<br>ditors with partially s<br>you need, fill it out, I | Property (Of<br>secured clain<br>number the | ficial Fori<br>ims that a<br>entries ir | m 106A/B) and on<br>re listed in<br>the boxes on the |
| Part 1: List Al  | l of Your PRIORITY Uns  | secured Claims   |   |   |   |   |   |  |
| 1. Do any credito  | rs have priority unsecured  | claims against you?  |   |   |   |   |   |  |
| ☐ No. Go to Pa   | art 2.  |  |   |   |   |   |   |  |
| Yes.   |   |  |   |   |   |   |   |  |
| identify what typ<br>possible, list the                      | be of claim it is. If a claim has<br>e claims in alphabetical order   | If a creditor has more than one posts both priority and nonpriority amou according to the creditor's name. icular claim, list the other creditors                    | unts, list that of<br>If you have n               | claim here a                                | nd show both priority a   | nd nonprior                                 | ity amount                              | s. As much as  |
| (For an explana  | ation of each type of claim, se   | e the instructions for this form in t  | he instruction                                    | booklet.)                                   |   |   |   |  |
|  |   |  |   |   | Total claim   | Priority amount                             |   | Nonpriority amount                                   |
|  | Canal Winchester Dept.  | Tax Last 4 digits of acco  | ount number                                       | 0334  | Unknown   |   | \$0.00                                  | \$0.00   |
| Complia<br>P.O. Box  | nce Division<br>x 182402  | When was the debt  | incurred?   | 2017  |   | -   |   |  |
|  | us, OH 43218<br>treet City State Zlp Code   | As of the date you fi  | ile the claim                                     | is: Chock a                                 | II that apply   |   |   |  |
|  | the debt? Check one.  | ☐ Contingent   | ne, the claim                                     | is. Check a                                 | ш шасарру   |   |   |  |
| Debtor 1 o   | nlv   | ☐ Unliquidated   |   |   |   |   |   |  |
| Debtor 2 o   | ,   | <u>_</u>   |   |   |   |   |   |  |
| _  | nd Debtor 2 only  | ■ Disputed  Type of PRIORITY u   | neocurod ol                                       | nim:  |   |   |   |  |
|  | e of the debtors and another  | <u></u> '  |   | aiiii.                                      |   |   |   |  |
| <u></u>  | his claim is for a communi  |  | Ü   |   |   |   |   |  |
|  | subject to offset?  | _  |   |   | · ·   |   |   |  |
| ■ No   | ,   | ☐ Claims for death o   | n personal in                                     | jury wrille yo                              | u were intoxicated  |   |   |  |
| ☐ Yes  |   | ☐ Other. Specify   | Гахеѕ   |   |   |   |   |  |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 29 of 54

| De  | btor 1 Jaylen D. Littlefield   |  | Case nui         | mber (if known)                 |                        |            |  |
|-----|--|--|------------------|---------------------------------|------------------------|------------|--|
| 2.2 | IRS- Bankruptcy Division Priority Creditor's Name  | Last 4 digits of account number          | 0334             | Unknown                         | \$0.00                 | \$0.00     |  |
|     | P.O. Box 7346 Philadelphia, PA 19101-7346  | When was the debt incurred?              | 2017             |                                 |                        |            |  |
|     | Number Street City State Zlp Code  | As of the date you file, the claim       | is: Check all    | that apply                      |                        |            |  |
|     | Who incurred the debt? Check one.  | ☐ Contingent                             |                  |                                 |                        |            |  |
|     | ■ Debtor 1 only  | ☐ Unliquidated                           |                  |                                 |                        |            |  |
|     | Debtor 2 only  | Disputed                                 |                  |                                 |                        |            |  |
|     | ☐ Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured cla           | im:              |                                 |                        |            |  |
|     | ☐ At least one of the debtors and another  | ☐ Domestic support obligations           |                  |                                 |                        |            |  |
|     | $\square$ Check if this claim is for a community debt  | Taxes and certain other debts y          | ou owe the go    | overnment                       |                        |            |  |
|     | Is the claim subject to offset?  | Claims for death or personal inj         | ury while you    | were intoxicated                |                        |            |  |
|     | ■ No   | Other. Specify                           |                  |                                 |                        |            |  |
|     | Yes  | Notice of B                              | ankruptcy I      | Filing                          |                        |            |  |
| 2.3 | State of Ohio Dept. of Tax   | Last 4 digits of account number          | 0334             | Unknown                         | \$0.00                 | \$0.00     |  |
|     | Priority Creditor's Name   |  |                  |                                 |                        |            |  |
|     | 30 E. Broad St., 17th Fl.  | When was the debt incurred?              | 2017             |                                 |                        |            |  |
|     | Columbus, OH 43215  Number Street City State Zlp Code  | As of the date you file, the claim       | is: Check all    | that apply                      |                        |            |  |
|     | Who incurred the debt? Check one.  | ☐ Contingent                             |                  |                                 |                        |            |  |
|     | ■ Debtor 1 only  | ☐ Unliquidated                           |                  |                                 |                        |            |  |
|     | Debtor 2 only  | ■ Disputed                               |                  |                                 |                        |            |  |
|     | ☐ Debtor 1 and Debtor 2 only   | Type of PRIORITY unsecured claim:        |                  |                                 |                        |            |  |
|     | ☐ At least one of the debtors and another  | ☐ Domestic support obligations           |                  |                                 |                        |            |  |
|     | ☐ Check if this claim is for a community debt  | ■ Taxes and certain other debts y        | ou owe the a     | overnment                       |                        |            |  |
|     | Is the claim subject to offset?  | ☐ Claims for death or personal inj       | ū                |                                 |                        |            |  |
|     | ■ No   | Other. Specify                           |                  |                                 |                        |            |  |
|     | Yes  | Taxes                                    |                  |                                 |                        |            |  |
| Pa  | rt 2: List All of Your NONPRIORITY Unsecu  | ıred Claims                              |                  |                                 |                        |            |  |
| 3.  | Oo any creditors have nonpriority unsecured claims against you?  |  |                  |                                 |                        |            |  |
|     | ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  |  |                  |                                 |                        |            |  |
|     | ■ Yes.   |  |                  |                                 |                        |            |  |
| 4.  | List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other | laim. For each claim listed, identify wh | nat type of clai | im it is. Do not list claims al | ready included in Part | 1. If more |  |

Total claim

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 30 of 54

Debtor 1 Jaylen D. Littlefield ase number (if known) 4.1 \$0.00 Aarons Rental Last 4 digits of account number 0334 Nonpriority Creditor's Name 5025 West Broad Street Ⅲ When was the debt incurred? 2016 Columbus, OH 43228 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections ■ Other. Specify For Notice Purposes Only ☐ Yes 4.2 Capital One Last 4 digits of account number 0334 \$456.00 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 2018 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.3 Capital One Last 4 digits of account number 0334 \$0.00 Nonpriority Creditor's Name P.O. Box 30281 When was the debt incurred? 2018 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Collections ☐ Yes ■ Other. Specify For Notice Purposes Only

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 31 of 54

Debtor 1 Jaylen D. Littlefield Case number (if known) 4.4 \$0.00 Credit Plus Last 4 digits of account number 0334 Nonpriority Creditor's Name 31550 Winterplace When was the debt incurred? 2018 Salisbury, MD 21804 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections ■ Other. Specify For Notice Purposes Only ☐ Yes 4.5 Direct TV Last 4 digits of account number 0334 \$0.00 Nonpriority Creditor's Name P.O. Box 78626 When was the debt incurred? 2018 Phoenix, AZ 85062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collections ☐ Yes Other. Specify For Notice Purposes Only 4.6 \$270.00 **Grant Medical Center** Last 4 digits of account number 0334 Nonpriority Creditor's Name P.O. Box 183221 When was the debt incurred? 2016 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 32 of 54

| Debt | or 1 Jaylen D. Littlefield  | Case number (if known)  |                  |  |  |  |  |
|------|---|---|------------------|--|--|--|--|
| 4.7  | Harris Originals  | Last 4 digits of account number 0334  | \$0.00           |  |  |  |  |
|      | Nonpriority Creditor's Name<br>800 Prime Pl.                                    | When was the debt incurred? 2017  |                  |  |  |  |  |
|      | Hauppauge, NY 11788   | As of the date you file the plains in Charles Hithert and he  |                  |  |  |  |  |
|      | Who incurred the debt? Check one.   | ber Street City State Zlp Code  As of the date you file, the claim is: Check all that apply               |                  |  |  |  |  |
|      | ■ Debtor 1 only   | ☐ Contingent  |                  |  |  |  |  |
|      | ☐ Debtor 2 only   | ☐ Unliquidated  |                  |  |  |  |  |
|      | Debtor 1 and Debtor 2 only  | ☐ Disputed  |                  |  |  |  |  |
|      |   |   |                  |  |  |  |  |
|      | ☐ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured claim:  ☐ Student loans   |                  |  |  |  |  |
|      | Check if this claim is for a community debt                                     | ☐ Obligations arising out of a separation agreement or divorce  | that you did not |  |  |  |  |
|      | Is the claim subject to offset?   | report as priority claims   | hio              |  |  |  |  |
|      | ■ No  | Debts to pension or profit-sharing plans, and other similar de  | edts             |  |  |  |  |
|      | Yes   | Collections For Notice Purposes Only  |                  |  |  |  |  |
| 4.8  | Insight Pest/Coast to Coast   | Last 4 digits of account number 0334  | \$467.00         |  |  |  |  |
|      | Nonpriority Creditor's Name<br>101 Hodencamp Rd. 120<br>Thousand Oaks, CA 91360 | When was the debt incurred? 2017  |                  |  |  |  |  |
|      | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |                  |  |  |  |  |
|      | Who incurred the debt? Check one.   |   |                  |  |  |  |  |
|      | Debtor 1 only   | ☐ Contingent  |                  |  |  |  |  |
|      | Debtor 2 only   | ☐ Unliquidated  |                  |  |  |  |  |
|      | ☐ Debtor 1 and Debtor 2 only ☐ Disputed   |   |                  |  |  |  |  |
|      | ☐ At least one of the debtors and another                                       | heck if this claim is for a community   |                  |  |  |  |  |
|      | ☐ Check if this claim is for a community  |   |                  |  |  |  |  |
|      | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                  |  |  |  |  |
|      | ■ No  | ebts  |                  |  |  |  |  |
|      | Yes   | ■ Other. Specify Collections  |                  |  |  |  |  |
| 4.9  | Navy Federal  | Last 4 digits of account number 0334  | \$8,991.00       |  |  |  |  |
|      | Nonpriority Creditor's Name<br>820 Follin Ln.                                   | When was the debt incurred? 2014  |                  |  |  |  |  |
|      | Vienna, VA 22180  | 2014  |                  |  |  |  |  |
|      | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply   |                  |  |  |  |  |
|      | Who incurred the debt? Check one.   |   |                  |  |  |  |  |
|      | Debtor 1 only   | ☐ Contingent  |                  |  |  |  |  |
|      | Debtor 2 only   | ☐ Unliquidated  |                  |  |  |  |  |
|      | Debtor 1 and Debtor 2 only  | ☐ Disputed  |                  |  |  |  |  |
|      | $\square$ At least one of the debtors and another                               | Type of NONPRIORITY unsecured claim:  |                  |  |  |  |  |
|      | Check if this claim is for a community  | ☐ Student loans   |                  |  |  |  |  |
|      | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                  |  |  |  |  |
|      | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar de                                  | ebts             |  |  |  |  |
|      | Yes   | ■ Other. Specify Collections  |                  |  |  |  |  |
|      |   |   |                  |  |  |  |  |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 33 of 54

Debtor 1 Jaylen D. Littlefield ase number (if known) 4.1 0 Navy Federal Credit Union 8050 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1 Security Pl. When was the debt incurred? 2016 Merrifield, VA 22116 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections ☐ Yes Other. Specify For Notice Purposes Only 4.1 \$0.00 Navy Federal Credit Union 1843 Last 4 digits of account number Nonpriority Creditor's Name 1 Security Pl. When was the debt incurred? 2015 Merrifield, VA 22116 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No Collections ☐ Yes Other. Specify For Notice Purposes Only 4.1 Ohio Health 0334 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 5350 Frantz Rd. When was the debt incurred? 2016 Dublin, OH 43016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Collections ☐ Yes Other. Specify For Notice Purposes Only

Document Page 34 of 54 Debtor 1 Jaylen D. Littlefield Case number (if known) 4.1 One Main 0334 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 6801 Colwell Blvd. When was the debt incurred? 2018 Irving, TX 75039 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collections ☐ Yes Other. Specify For Notice Purposes Only 4.1 Pay Pal 0334 \$1,151.35 Last 4 digits of account number Nonpriority Creditor's Name 2211 N First St□ When was the debt incurred? 2016 Gifford, WA 99131 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collections Other. Specify U.S. Dept. Ed/Nelnet 0334 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3015 Parker Rd. 400 2010 Aurora, CO 80014 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

For Notice Purposes Only

Collections

Document Page 35 of 54 Debtor 1 Jaylen D. Littlefield ase number (if known) 4.1 U.S. Dept. Edu 0334 \$4,419.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 5609 When was the debt incurred? 2010 Greenville, TX 75403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Collections 4.1 7 U.S. Dept. Edu 0334 \$6,426,00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 5609 When was the debt incurred? 2010 Greenville, TX 75403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Collections 4.1 U.S. Dept. Edu 0334 \$3,209.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 5609 When was the debt incurred? 2010 Greenville, TX 75403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

■ No

☐ Yes

Student loans

☐ Other. Specify

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Collections

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 36 of 54

| Debto    | r 1 Jaylen D. Littlefield   |   | Case number (if known)                      |          |  |  |  |
|----------|---|---|---|----------|--|--|--|
| 4.1<br>9 | US Bank   | Last 4 digits of account number   | 0334  | \$0.00   |  |  |  |
|          | Nonpriority Creditor's Name<br>4325 17th Ave. SW<br>Fargo, ND 58125                     | When was the debt incurred?   | 2018  |          |  |  |  |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                    | As of the date you file, the claim is                                       | : Check all that apply                      |          |  |  |  |
|          | Debtor 1 only   | ☐ Contingent  |   |          |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |   |          |  |  |  |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |          |  |  |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured   | claim:                                      |          |  |  |  |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |   |          |  |  |  |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separ report as priority claims              | ation agreement or divorce that you did not |          |  |  |  |
|          | ■ No  | ☐ Debts to pension or profit-sharing  | plans, and other similar debts              |          |  |  |  |
|          | Yes   | ■ Other. Specify Collections For Notice P                                   | urposes Only                                |          |  |  |  |
| 4.2      | Vivint Inc Nonpriority Creditor's Name  | Last 4 digits of account number   | 0334  | \$400.00 |  |  |  |
|          | 4931 North 300 W.<br>Provo, UT 84604  | When was the debt incurred?   | 2016  |          |  |  |  |
|          | Number Street City State Zlp Code   | As of the date you file, the claim is: Check all that apply                 |   |          |  |  |  |
|          | Who incurred the debt? Check one.   |   |   |          |  |  |  |
|          | Debtor 1 only   | ☐ Contingent  |   |          |  |  |  |
|          | ☐ Debtor 2 only   | Debtor 2 only   |   |          |  |  |  |
|          | ☐ Debtor 1 and Debtor 2 only ☐ Disputed   |   |   |          |  |  |  |
|          | $\square$ At least one of the debtors and another                                       | Type of NONPRIORITY unsecured   | claim:                                      |          |  |  |  |
|          | ☐ Check if this claim is for a community  |   |   |          |  |  |  |
|          | debt<br>Is the claim subject to offset?   | ☐ Obligations arising out of a separ report as priority claims              | ation agreement or divorce that you did not |          |  |  |  |
|          | ■ No  | Debts to pension or profit-sharing  |   |          |  |  |  |
|          | Yes   | Other. Specify Collections  |   |          |  |  |  |
| 4.2      | Walmart/Syncb   | Last 4 digits of account number   | 0334  | \$0.00   |  |  |  |
|          | Nonpriority Creditor's Name P.O. Box 965024 Orlando, El 23206                           | When was the debt incurred?   | 2018  |          |  |  |  |
|          | Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is                                       | : Check all that apply                      |          |  |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent  |   |          |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |   |          |  |  |  |
|          |   |   |   |          |  |  |  |
|          | _   |   |   |          |  |  |  |
|          | At least one of the debtors and another   | Student loans   |   |          |  |  |  |
|          | ☐ Check if this claim is for a community debt   |   | ation agreement or divorce that you did not |          |  |  |  |
|          | Is the claim subject to offset?   |   |   |          |  |  |  |
|          | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts |   |          |  |  |  |
|          | Collections  □ Yes  Collections  For Notice Purposes Only                               |   |   |          |  |  |  |
|          | •   | I OI NOUCE F  | urposes Orny                                |          |  |  |  |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Case 2:18-bk-57992 Document

Page 37 of 54 Case number (if known) Debtor 1 Jaylen D. Littlefield

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| pport obligations   |     | 7   | Total Claim |
|---|-----|---|-------------|
|   | 6a. | \$  | 0.00        |
|   |     |   |             |
| ertain other debts you owe the government   | 6b. | \$  | 0.00        |
| eath or personal injury while you were intoxicated                                  | 6c. | \$  | 0.00        |
| Il other priority unsecured claims. Write that amount here.                         | 6d. | \$  | 0.00        |
|   |     |   |             |
| y. Add lines 6a through 6d.   | 6e. | \$  | 0.00        |
|   |     |   |             |
|   | C.f |   | Total Claim |
| ns  | 6f. | \$  | 14,054.00   |
|   |     |   |             |
|   | 60  | \$  | 0.00        |
| arising out of a separation agreement or divorce that                               | 6g. | \$  |             |
| report as priority claims   |     | Ф   | 0.00        |
| report as priority claims<br>nsion or profit-sharing plans, and other similar debts | 6h. |   | 11,735.35   |
| report as priority claims   | 6i. | \$  | 11,733.33   |
| report a  | •   | nonpriority unsecured claims. Write that amount 6i. | \$          |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main

|                     |                          | I A A A A A A A A A A A A A A A A A A A | 111 1 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |  |
|---------------------|--------------------------|---|---------------------------------------|--|
| Fill in this infor  | mation to identify your  | case:                                   |                                       |  |
| Debtor 1            | Jaylen D. Littlefield    | d                                       |                                       |  |
|                     | First Name               | Middle Name                             | Last Name                             |  |
| Debtor 2            |                          |   |                                       |  |
| (Spouse if, filing) | First Name               | Middle Name                             | Last Name                             |  |
| United States Ba    | ankruptcy Court for the: | SOUTHERN DISTRICT                       | OF OHIO                               |  |
| Case number         |                          |   |                                       |  |
| (if known)          |                          |   |                                       |  |
|                     |                          |   |                                       |  |

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р   | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|---|
| 2.1 | Direct TV<br>P.O. Box 78626<br>Phoenix, AZ 85062   | Cable                                   |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main

|                        |  | Docume                          | ent Page 39 d             | of 54   |
|------------------------|--|---------------------------------|---------------------------|---|
| Fill in th             | is information to identify you                     | ır case:                        |                           |   |
| Debtor 1               | loulon D. Littlefie                                | ald.                            |                           |   |
| Deploi                 | Jaylen D. Littlefie                                | Middle Name                     | Last Name                 |   |
| Debtor 2               |  |                                 |                           |   |
| (Spouse if, f          |  | Middle Name                     | Last Name                 |   |
| United S               | tates Bankruptcy Court for the:                    | SOUTHERN DISTRICT               | OF OHIO                   |   |
| _                      |  |                                 |                           |   |
| Case nur<br>(if known) | mber   |                                 |                           | Chack if this is an   |
| ,ii kilowii)           |  |                                 |                           | ☐ Check if this is an amended filing  |
|                        |  |                                 |                           | amended iming   |
| Offici:                | al Form 106H                                       |                                 |                           |   |
|                        |  | .  .   . (                      |                           |   |
| <u>sche</u>            | dule H: Your Co                                    | debtors                         |                           | 12/15   |
| `odobto                | re are poople or entitiesbe                        | are also liable for any deb     | te vou may have Pe a      | is complete and accurate as possible. If two married  |
| ill it out,            |  | e boxes on the left. Attach     | the Additional Page t     | tion. If more space is needed, copy the Additional Page to this page. On the top of any Additional Pages, write     |
| 1. Do                  | o you have any codebtors? (                        | If you are filing a joint case, | do not list either spouse | e as a codebtor.  |
| ■ No                   | n  |                                 |                           |   |
|                        |  |                                 |                           |   |
|                        | 55   |                                 |                           |   |
|                        |  |                                 |                           | ry? (Community property states and territories include  |
| Arizo                  | ona, California, Idaho, Louisian                   | a, Nevada, New Mexico, Pu       | erto Rico, Texas, Wash    | ington, and Wisconsin.)   |
| ■ N                    | o. Go to line 3.                                   |                                 |                           |   |
|                        | o. Go to line 3.<br>es. Did your spouse, former sp | ouse or legal equivalent live   | with you at the time?     |   |
| <u></u> П 1,           | es. Dia your spouse, former sp                     | ouse, or legal equivalent live  | e with you at the time?   |   |
|                        |  |                                 |                           | r if your spouse is filing with you. List the person show   |
|                        |  |                                 |                           | sure you have listed the creditor on Schedule D (Offici<br>06G). Use Schedule D, Schedule E/F, or Schedule G to the |
|                        | Column 2.  | arr orm 1002/1 ), or conca      | uic o (omoiai i omi i     | 700). Our contentie B, contentie E/1, or contentie C to   |
|                        | Column 1: Your codebtor                            |                                 |                           | Column 2: The creditor to whom you owe the debt   |
|                        | Name, Number, Street, City, State and              | ZIP Code                        |                           | Check all schedules that apply:   |
|                        |  |                                 |                           | _   |
| 3.1                    |  |                                 |                           | Schedule D, line  |
|                        | Name   |                                 |                           | ☐ Schedule E/F, line  |
|                        |  |                                 |                           | ☐ Schedule G, line  |
|                        | Number Street                                      |                                 |                           | <u> </u>  |
|                        | City   | State                           | ZIP Code                  |   |
|                        |  |                                 |                           |   |
| 3.2                    |  |                                 |                           | ☐ Schedule D, line  |
|                        | Name   |                                 |                           | ☐ Schedule E/F, line  |
|                        |  |                                 |                           | ☐ Schedule G, line  |
|                        | Number Street                                      |                                 |                           | _   |
|                        | City   | State                           | ZIP Code                  |   |

# Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 40 of 54

|             |   |                            |   |          |      | •           |              |                        |                                  |          |
|-------------|---|----------------------------|---|----------|------|-------------|--------------|------------------------|----------------------------------|----------|
|             | in this information to identify your cotor 1  Jaylen D. Litt  |                            |   |          |      |             |              |                        |                                  |          |
|             | otor 2  |                            |   |          | _    |             |              |                        |                                  |          |
| Uni         | ted States Bankruptcy Court for the   | : SOUTHERN DISTRIC         | CT OF OHIO  |          |      |             |              |                        |                                  |          |
|             | se number<br>nown)  |                            | -   |          |      |             |              | d filing<br>ent showin | g postpetition<br>ollowing date: | chapter  |
| 0           | fficial Form 106I   |                            |   |          |      | N           | MM / DD/ Y   | YYY                    |                                  |          |
| S           | chedule I: Your Inc   | ome                        |   |          |      |             |              |                        |                                  | 12/15    |
| spo<br>atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment | r spouse is not filing wi  | ith you, do not includ                              | e infor  | mati | on abou     | t your spo   | ouse. If mo            | ore space is                     | needed,  |
|             | information.  |                            | Debtor 1  |          |      |             |              |                        | ling spouse                      |          |
|             | If you have more than one job, attach a separate page with information about additional   | Employment status          | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |          |      |             | ☐ Emplo      | •                      |                                  |          |
|             | employers.  | Occupation                 | Military Disability                                 |          |      |             |              |                        |                                  |          |
|             | Include part-time, seasonal, or self-employed work.   | Employer's name            |   |          |      |             |              |                        |                                  |          |
|             | Occupation may include student or homemaker, if it applies.   | Employer's address         |   |          |      |             |              |                        |                                  |          |
|             |   | How long employed t        | here? Since 20                                      | 15       |      |             | _            |                        |                                  |          |
| Par         | Give Details About Mor  | nthly Income               |   |          |      |             |              |                        |                                  |          |
|             | mate monthly income as of the duse unless you are separated.  | ate you file this form. If | you have nothing to re                              | port for | any  | line, write | e \$0 in the | space. Inc             | clude your nor                   | n-filing |
|             | u or your non-filing spouse have mo<br>e space, attach a separate sheet to  |                            | ombine the information                              | for all  | empl | oyers for   | that perso   | n on the li            | nes below. If y                  | you need |
|             |   |                            |   |          |      | For Del     | btor 1       |                        | btor 2 or<br>ng spouse           |          |
| 2.          | List monthly gross wages, sala deductions). If not paid monthly,  |                            |   | 2.       | \$   |             | 0.00         | \$                     | N/A                              |          |
| 3.          | Estimate and list monthly overt   | ime pay.                   |   | 3.       | +\$  |             | 0.00         | +\$                    | N/A                              |          |
| 4.          | Calculate gross Income. Add lir   | ne 2 + line 3.             |   | 4.       | \$   |             | 0.00         | \$                     | N/A                              |          |

## Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 41 of 54

| Deb | tor 1         | Jaylen D. Littlefield   |             | Ca   | se number (if known) |           |                      |                        |
|-----|---------------|---|-------------|------|----------------------|-----------|----------------------|------------------------|
|     |               |   |             | F    | For Debtor 1         |           | ebtor 2 or           | se                     |
|     | Copy          | y line 4 here   | 4.          | \$   | 0.00                 | \$        |                      | I/A                    |
| 5.  | List          | all payroll deductions:   |             |      |                      |           |                      |                        |
|     | 5a.           | Tax, Medicare, and Social Security deductions   | 5a          | . \$ | 0.00                 | \$        | N                    | I/A                    |
|     | 5b.           | Mandatory contributions for retirement plans  | 5b          | . \$ |                      | \$        |                      | <del>I</del> /A        |
|     | 5c.           | Voluntary contributions for retirement plans  | 5c.         | . \$ |                      | \$        |                      | I/A                    |
|     | 5d.           | Required repayments of retirement fund loans  | 5d          | . \$ | 0.00                 | \$        | N                    | I/A                    |
|     | 5e.           | Insurance   | 5e          | . \$ | 0.00                 | \$        | N                    | I/A                    |
|     | 5f.           | Domestic support obligations  | 5f.         |      |                      | \$        |                      | <u>I/A</u>             |
|     | 5g.           | Union dues  | 5g          |      | 0.00                 | \$        |                      | <del>I/A</del>         |
| _   | 5h.           | Other deductions. Specify:  | _ 5h        |      |                      | -         |                      | <u> </u>               |
| 6.  |               | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.          | \$   | 0.00                 | \$        |                      | <u>I/A</u>             |
| 7.  |               | ulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.          | \$   | 0.00                 | \$        | N                    | <u>I/A</u>             |
| 8.  | List 8a.      | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.             | 8a          | . \$ | 0.00                 | \$        |                      | J/A                    |
|     | 8b.           | Interest and dividends  | 8b          |      |                      | \$        |                      | <del>\</del> \/A       |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce   |             |      |                      | · <u></u> |                      |                        |
|     |               | settlement, and property settlement.  | 8c.         |      |                      | \$        |                      | √A                     |
|     | 8d.           | Unemployment compensation   | 8d          |      |                      | \$        |                      | <u>I/A</u>             |
|     | 8e.<br>8f.    | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Military Disability | 8e<br>_ 8f. |      |                      | \$<br>\$  |                      | I/A<br>I/A             |
|     |               | GI Bill   |             | \$   | 840.50               | \$        | N                    | I/A                    |
|     | 8g.           | Pension or retirement income  | _<br>8g     |      |                      | \$        |                      | 1/A                    |
|     | 8h.           | Other monthly income. Specify:  | 8h          |      | 0.00                 | + \$      |                      | I/A                    |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.          | \$_  | 2,773.18             | \$        |                      | N/A                    |
| 10. |               | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.         | \$   | 2,773.18 + \$_       |           | N/A = \$             | 2,773.18               |
| 11. | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a cify:                      | depe        |      |                      |           | hedule J.<br>11. +\$ | 0.00                   |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certaines   |             |      |                      |           | 12. \$_              | 2,773.18               |
| 13. | Do y          | ou expect an increase or decrease within the year after you file this form'   | ?           |      |                      |           |                      | nbined<br>nthly income |
|     | _             | Vas Evolain:  |             |      |                      |           |                      |                        |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 42 of 54

| <b></b>    | in their information to intendifference  |                       |                  |                                    |  |
|------------|--|-----------------------|------------------|------------------------------------|--|
| FIII       | in this information to identify your case:   |                       |                  |                                    |  |
| Deb        | Jaylen D. Littlefield  |                       |                  | k if this is:<br>An amended filing |  |
|            | otor 2ouse, if filing)   |                       |                  | A supplement show                  | ving postpetition chapter the following date:    |
| Unit       | ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO   | <u> </u>              | ī                | MM / DD / YYYY                     |  |
|            | nown)  |                       |                  |                                    |  |
| Of         | fficial Form 106J  |                       |                  |                                    |  |
| So         | chedule J: Your Expenses   |                       |                  |                                    | 12/15  |
| Be         | as complete and accurate as possible. If two married people ar<br>ormation. If more space is needed, attach another sheet to this<br>mber (if known). Answer every question.                   |                       |                  |                                    |  |
| Par<br>1.  | t 1: Describe Your Household Is this a joint case?   |                       |                  |                                    |  |
|            | ■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?  ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses   | s for Sanarata House  | hold of Debt     | or 2                               |  |
| 2.         | Do you have dependents?  | nor deparate mouse    | noid of Debt     | OI Z.                              |  |
| ۷.         | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent  | Dependent's relation  |                  | Dependent's age                    | Does dependent live with you?                    |
|            | Do not state the dependents names.   |                       |                  |                                    | □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No |
| 3.         | Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes  |                       |                  |                                    | ☐ Yes  |
| Est<br>exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date. |                       |                  |                                    |  |
| the        | lude expenses paid for with non-cash government assistance is value of such assistance and have included it on <i>Schedule I:</i> Y  |                       |                  | Your expe                          | enses  |
| 4.         | The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.  | nclude first mortgage | 4. \$            |                                    | 1,106.00   |
|            | If not included in line 4:   |                       |                  |                                    |  |
|            | 4a. Real estate taxes  |                       | 4a. \$           |                                    | 0.00   |
|            | 4b. Property, homeowner's, or renter's insurance   |                       | 4b. \$           |                                    | 0.00   |
|            | 4c. Home maintenance, repair, and upkeep expenses  |                       | 4c. \$<br>4d. \$ |                                    | 100.00   |
| 5.         | <ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as ho</li> </ul>   | me equity loans       | 4a. \$<br>5. \$  |                                    | 0.00   |

## Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 43 of 54

| Deb      | otor 1 Jaylen D. Littlefield  | Case num      | nber (if known)   |                             |
|----------|---|---------------|-------------------|-----------------------------|
| 6.       | Utilities:  |               |                   |                             |
| 0.       | 6a. Electricity, heat, natural gas  | 6a.           | . \$              | 252.00                      |
|          | 6b. Water, sewer, garbage collection  | 6b.           |                   | 100.00                      |
|          | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.           | . \$              | 180.00                      |
|          | 6d. Other. Specify: Cable   | 6d.           | · <u> </u>        | 211.00                      |
|          | Home Security   |               | \$                | 80.00                       |
| 7.       | Food and housekeeping supplies  |               |                   | 300.00                      |
| 7.<br>8. | Childcare and children's education costs  | 8.            | · <u> </u>        |                             |
| 9.       | Clothing, laundry, and dry cleaning   | 9.            | ·                 | 0.00                        |
| -        | Personal care products and services   | 9.<br>10.     | *                 | 175.00                      |
|          | •   |               | ·                 | 0.00                        |
|          | Medical and dental expenses   | 11.           | . Ф               | 25.00                       |
| 12.      | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.   | 12.           | . \$              | 300.00                      |
| 13       | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.           | ·                 | 100.00                      |
|          | Charitable contributions and religious donations  | 14.           |                   |                             |
|          | Insurance.  | 14.           | . Ψ               | 0.00                        |
| 15.      | Do not include insurance deducted from your pay or included in lines 4 or 20.   |               |                   |                             |
|          | 15a. Life insurance   | 15a.          | \$                | 0.00                        |
|          | 15b. Health insurance   | 15b.          | *                 | 0.00                        |
|          | 15c. Vehicle insurance  | 15b.          | · .               | 150.00                      |
|          | 15d. Other insurance. Specify:  | 15d.          |                   |                             |
| 40       |   | 130.          | . Ф               | 0.00                        |
|          | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  | 16.           | . \$              | 0.00                        |
| 17.      | Installment or lease payments:  |               | •                 |                             |
|          | 17a. Car payments for Vehicle 1   | 17a.          | · -               | 460.00                      |
|          | 17b. Car payments for Vehicle 2   | 17b.          | ·                 | 0.00                        |
|          | 17c. Other. Specify:  | 17c.          | ·                 | 0.00                        |
|          | 17d. Other. Specify:  | 17d.          | . \$              | 0.00                        |
|          | Your payments of alimony, maintenance, and support that you did not report deducted from your pay on line 5, Schedule I, Your Income (Official Form 10  |               | . \$              | 0.00                        |
| 19.      | Other payments you make to support others who do not live with you.   |               | \$                | 0.00                        |
|          | Specify:  | 19.           |                   |                             |
| 20.      | and the first of the first section of the first section is a section of the first section of |               |                   |                             |
|          | 20a. Mortgages on other property  | 20a.          |                   | 0.00                        |
|          | 20b. Real estate taxes  | 20b.          | ·                 | 0.00                        |
|          | 20c. Property, homeowner's, or renter's insurance   | 20c.          | . \$              | 0.00                        |
|          | 20d. Maintenance, repair, and upkeep expenses   | 20d.          | . \$              | 0.00                        |
|          | 20e. Homeowner's association or condominium dues  | 20e.          | . \$              | 0.00                        |
| 21.      | Other: Specify: Personal Grooming   | 21.           | . +\$             | 100.00                      |
|          | Washer & Dryer Payment  |               | +\$               | 116.00                      |
| 22       |   |               |                   |                             |
| 22.      |   |               |                   | 0.755.00                    |
|          | 22a. Add lines 4 through 21.  |               | \$                | 3,755.00                    |
|          | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J  | J-2           | \$                |                             |
|          | 22c. Add line 22a and 22b. The result is your monthly expenses.   |               | \$                | 3,755.00                    |
| 23.      | Calculate your monthly net income.  |               |                   |                             |
|          | 23a. Copy line 12 (your combined monthly income) from Schedule I.   | 23a.          | . \$              | 2,773.18                    |
|          | 23b. Copy your monthly expenses from line 22c above.  | 23b.          | \$                | 3,755.00                    |
|          |   |               | ,                 |                             |
|          | 23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .   | 23c.          | . \$              | -981.82                     |
| 24.      | Do you expect an increase or decrease in your expenses within the year after  |               |                   |                             |
|          | For example, do you expect to finish paying for your car loan within the year or do you expect modification to the terms of your mortgage?  No.   | your mortgage | payment to increa | se or decrease because of a |
|          | Explain here: Debtor is on VA disability for knees, migraine  | es, and PTS   | D.                |                             |
|          | ·   |               |                   |                             |

## Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 44 of 54

| Fill in this infor                                     | mation to identify your                            | case.                     |                            |  |                                  |
|--|--|---------------------------|----------------------------|--|----------------------------------|
|  | •  |                           |                            |  |                                  |
| Debtor 1   | Jaylen D. Littlefield                              | Middle Name               | Last Name                  |  |                                  |
| Debtor 2   |  |                           |                            |  |                                  |
| (Spouse if, filing)                                    | First Name   | Middle Name               | Last Name                  |  |                                  |
| United States Ba                                       | ankruptcy Court for the:                           | SOUTHERN DISTRICT         | OF OHIO                    |  |                                  |
| Case number  |  |                           |                            |  |                                  |
| (if known)   |  |                           |                            |  | ck if this is an<br>ended filing |
| If two married p<br>You must file th<br>obtaining mone | tion About a                                       | n connection with a bank  | nsible for supplying corr  |  |                                  |
| Sig  | ın Below   |                           |                            |  |                                  |
| Did you pa   | ay or agree to pay some                            | one who is NOT an attorn  | ney to help you fill out b | ankruptcy forms?                                       |                                  |
| ■ No   |  |                           |                            |  |                                  |
| ☐ Yes.   | Name of person                                     |                           |                            | Attach Bankruptcy Petition  Declaration, and Signature |                                  |
|  | alty of perjury, I declare<br>re true and correct. | that I have read the sumr | mary and schedules filed   | d with this declaration and                            |                                  |
| X /s/ Jav  | len D. Littlefield                                 |                           | X                          |  |                                  |
| Jaylen   | D. Littlefield<br>ure of Debtor 1                  |                           | Signature of               | Debtor 2   |                                  |
| Date   | December 22, 2018                                  |                           | Date                       |  |                                  |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 45 of 54

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Southern District of Ohio

| In re       | Jaylen D. Littlefield  |  | Case No  | ).                    |                    |
|-------------|--|--|--|-----------------------|--------------------|
|             |  | Debtor(s)  | Chapter  | 7                     |                    |
|             | DISCLOSURE OF COMPE  | ENSATION OF ATTOR  | RNEY FOR I   | DEBTOR(S)             |                    |
| (           | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation  | ing of the petition in bankruptcy,   | or agreed to be pa   | id to me, for service |                    |
|             | For legal services, I have agreed to accept  |  | \$   | 750.00                |                    |
|             | Prior to the filing of this statement I have received  |  | \$   | 750.00                |                    |
|             | Balance Due  |  |  | 0.00                  |                    |
| 2. ′        | The source of the compensation paid to me was:   |  |  |                       |                    |
|             | ■ Debtor □ Other (specify):  |  |  |                       |                    |
| 3. ′        | The source of compensation to be paid to me is:  |  |  |                       |                    |
|             | ■ Debtor □ Other (specify):  |  |  |                       |                    |
| 4.          | I have not agreed to share the above-disclosed com   | pensation with any other person  | unless they are me   | mbers and associat    | es of my law firm. |
|             | ☐ I have agreed to share the above-disclosed compensorpy of the agreement, together with a list of the national statement.   |  |  |                       | ny law firm. A     |
| 5.          | In return for the above-disclosed fee, I have agreed to r  | render legal service for all aspects   | s of the bankruptc   | v case, including:    |                    |
| 1           | <ul> <li>Analysis of the debtor's financial situation, and render.</li> <li>Preparation and filing of any petition, schedules, state.</li> <li>Representation of the debtor at the meeting of credit.</li> <li>[Other provisions as needed] Negotiations with secured creditors to red agreements and applications as needed; hearings.</li> </ul> | atement of affairs and plan which<br>tors and confirmation hearing, an<br>uce to market value; exemption | may be required;<br>d any adjourned h<br>on planning; prep | earings thereof;      | of reaffirmation   |
| <b>6.</b> ] | By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any dischadversary proceeding.   |  |  | lief from stay acti   | ons or any other   |
|             |  | CERTIFICATION  |  |                       |                    |
|             | certify that the foregoing is a complete statement of an ankruptcy proceeding.   | ny agreement or arrangement for  | payment to me fo   | r representation of t | he debtor(s) in    |
| D           | ecember 22, 2018   | /s/ Ronald A. Witte  |  |                       |                    |
| D           | ate  | Ronald A. Wittel, J  |  |                       |                    |
|             |  | Signature of Attorne<br>Ronald A. Wittel, J  |  |                       |                    |
|             |  | Attorney at Law  |  |                       |                    |
|             |  | 1141 South High S  |  |                       |                    |
|             |  | Columbus, OH 432<br>(614) 445-3000 Fa  |  | 80                    |                    |
|             |  | rwittel3@yahoo.co  |  | 00                    |                    |
|             |  | Name of law firm   |  |                       |                    |

## Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 46 of 54

| Fill ir          | n this information to identify your case:  |  |   |                     |                                     | irected in this form and   | l in Form                         |
|------------------|--|--|---|---------------------|-------------------------------------|--|-----------------------------------|
| Debt             | tor 1 Jaylen D. Littlefield  |  | 12  | 22A-1S              | upp:                                |  |                                   |
| Debt<br>(Spou    | tor 2  |  |   | ■ 1. 7              | here is no pres                     | umption of abuse   |                                   |
| Unite            | ed States Bankruptcy Court for the: Southern District of   | Ohio                                   |   |                     | applies will be m                   | o determine if a presumade under Chapter 7                         |                                   |
| Case<br>(if kno  | e number<br>wn)  |  |   | □ 3. 1              | he Means Test                       | icial Form 122A-2).  does not apply now be service but it could ap |                                   |
|                  |  |  |   |                     | •                                   | n amended filing   | ppry later.                       |
| Off              | icial Form 122A - 1  |  |   |                     |                                     | g  |                                   |
|                  | apter 7 Statement of Your Curi   | ent Mo                                 | nthly Inc                                 | com                 | е                                   |  | 12/15                             |
| attach<br>case r | complete and accurate as possible. If two married people are a separate sheet to this form. Include the line number to who number (if known). If you believe that you are exempted from ying military service, complete and file Statement of Exempted 1:  Calculate Your Current Monthly Income | nich the addition a presumption        | onal information<br>n of abuse becar      | applies<br>use you  | . On the top of an do not have prin | ny additional pages, wri<br>narily consumer debts o                | te your name and<br>or because of |
| 1.               | What is your marital and filing status? Check one only   | y.                                     |   |                     |                                     |  |                                   |
|                  | ■ Not married. Fill out Column A, lines 2-11.  |  |   |                     |                                     |  |                                   |
|                  | $\hfill\square$<br>Married and your spouse is filing with you. Fill out  | both Column                            | s A and B, lines                          | 2-11.               |                                     |  |                                   |
|                  | $\hfill\square$<br>Married and your spouse is NOT filing with you. Y   | ou and your                            | spouse are:                               |                     |                                     |  |                                   |
|                  | ☐ Living in the same household and are not legal   | y separated                            | Fill out both Co                          | olumns              | A and B, lines 2                    | 2-11.  |                                   |
|                  | ☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading   | gally separate                         | ed under nonba                            | nkrupto             | y law that applie                   | es or that you and you   |                                   |
| 10<br>the        | Il in the average monthly income that you received from all s<br>01(10A). For example, if you are filing on September 15, the 6-mo<br>e 6 months, add the income for all 6 months and divide the total b<br>couses own the same rental property, put the income from that pro                    | nth period woul<br>by 6. Fill in the r | ld be March 1 thro<br>esult. Do not inclu | ough Aug<br>ide any | gust 31. If the amoincome amount m  | ount of your monthly incor<br>ore than once. For examp             | me varied during<br>ole, if both  |
|                  |  |  |   | Colui<br>Debt       |                                     | Column B Debtor 2 or non-filing spouse                             |                                   |
|                  | Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).  | nd commiss                             | ions (before all                          | \$                  | 1,132.07                            | \$   |                                   |
|                  | <b>Alimony and maintenance payments.</b> Do not include p Column B is filled in.   | ayments fron                           | n a spouse if                             | \$                  | 0.00                                | \$   |                                   |
|                  | All amounts from any source which are regularly pai<br>of you or your dependents, including child support. I<br>from an unmarried partner, members of your household,<br>and roommates. Include regular contributions from a spo<br>filled in. Do not include payments you listed on line 3.     | Include regula<br>your depend          | ar contributions ents, parents,           | \$                  | 0.00                                | \$   |                                   |
|                  | Net income from operating a business, profession, o  | r farm                                 |   |                     |                                     |  |                                   |
|                  |  |  | ebtor 1                                   |                     |                                     |  |                                   |
|                  | Gross receipts (before all deductions)   | \$ 0.00                                | _   |                     |                                     |  |                                   |
|                  | Ordinary and necessary operating expenses  | -\$ 0.00                               | _   | . •                 | 0.00                                | ¢  |                                   |
|                  | Net monthly income from a business, profession, or farm  | \$                                     | Copy here ->                              | <b>&gt;</b>         | 0.00                                | \$   |                                   |
| 6.               | Net income from rental and other real property   | De                                     | btor 1                                    |                     |                                     |  |                                   |
|                  | Gross receipts (before all deductions)   | \$ 0.00                                |   |                     |                                     |  |                                   |
|                  | Ordinary and necessary operating expenses  | -\$ 0.00                               | _   |                     |                                     |  |                                   |
| i                | Net monthly income from rental or other real property  | ·                                      | Copy here ->                              | <b>&gt;</b> \$      | 0.00                                | \$   |                                   |
|                  | Interest, dividends, and royalties   | ·                                      | _   | \$                  | 0.00                                | \$   |                                   |
|                  |  |  |   |                     |                                     |  |                                   |

Official Form 122A-1

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 47 of 54

Debtor 1 Jaylen D. Littlefield Fage 47 01 34

Case number (if known)

|      |  |   |          | Column<br>Debtor |                | Column B Debtor 2 or non-filing s |           |                       |
|------|--|---|----------|------------------|----------------|-----------------------------------|-----------|-----------------------|
| 8.   | Unemployment compensation  |   |          | \$               | 0.00           | \$                                | •         |                       |
|      | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:   | received was a benefi                               | it under |                  |                |                                   |           |                       |
|      | For you \$   | 0.0   | 00       |                  |                |                                   |           |                       |
|      | For you \$ For your spouse \$  |   |          |                  |                |                                   |           |                       |
| 9.   | <b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.   |   | sa       | \$               | 0.00           | \$                                |           |                       |
| 10.  | Income from all other sources not listed above. Spe<br>Do not include any benefits received under the Social S<br>received as a victim of a war crime, a crime against hur<br>domestic terrorism. If necessary, list other sources on a<br>total below.  | Security Act or payment<br>manity, or international | ts<br>or |                  |                |                                   |           |                       |
|      | Military Disability  |   |          | \$               | 1,932.68       | \$                                |           |                       |
|      | GI Bill  |   |          | \$               | 840.50         | \$                                |           |                       |
|      | Total amounts from separate pages, if any.   |   | +        | \$               | 0.00           | \$                                |           |                       |
| 11.  | Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column |   | \$       | 3,905.25         | 5              |                                   | = \$      | 3,905.25              |
| Part | 2: Determine Whether the Means Test Applies to   | o You   |          |                  |                |                                   | Total o   | current monthly<br>le |
| 12.  | Calculate your current monthly income for the year.  | Follow these steps:                                 |          |                  |                |                                   |           |                       |
|      | 12a. Copy your total current monthly income from line 1  | 1   |          | C                | opy line 11    | nere=>                            | \$        | 3,905.25              |
|      | Multiply by 12 (the number of months in a year)  |   |          |                  |                |                                   | X         | 12                    |
|      | 12b. The result is your annual income for this part of the   | e form  |          |                  |                | 12b                               | · \$      | 46,863.00             |
| 13.  | Calculate the median family income that applies to   | you. Follow these step                              | s:       |                  |                |                                   |           |                       |
|      | Fill in the state in which you live.   | ОН  |          |                  |                |                                   |           |                       |
|      | Fill in the number of people in your household.  | 1   |          |                  |                |                                   |           |                       |
|      | Fill in the median family income for your state and size To find a list of applicable median income amounts, go  | online using the link sp                            | ecified  | in the sep       | parate instruc | 13.<br>tions                      | \$        | 48,441.00             |
|      | for this form. This list may also be available at the bank   | ruptcy clerk's office.                              |          |                  |                |                                   |           |                       |
| 14.  | How do the lines compare?  |   |          |                  |                |                                   |           |                       |
|      | 14a. Line 12b is less than or equal to line 13. O Go to Part 3.  | n the top of page 1, ch                             | eck box  | 1, There         | is no presun   | nption of abuse                   | Э.        |                       |
|      | 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.   | of page 1, check box 2,                             | The pre  | esumptio         | n of abuse is  | determined by                     | / Form 1. | 22A-2.                |
| Part | 3: Sign Below  |   |          |                  |                |                                   |           |                       |
|      | By signing here, I declare under penalty of perjury  | that the information or                             | this sta | atement a        | ind in any att | achments is tr                    | ue and c  | orrect.               |
|      | X /s/ Jaylen D. Littlefield  |   |          |                  |                |                                   |           |                       |
|      | Jaylen D. Littlefield<br>Signature of Debtor 1   |   |          |                  |                |                                   |           |                       |
|      | Date December 22, 2018 MM / DD / YYYY  |   |          |                  |                |                                   |           |                       |
|      | If you checked line 14a, do NOT fill out or file Forn  | n 122A-2.   |          |                  |                |                                   |           |                       |
|      | If you checked line 14b, fill out Form 122A-2 and fi   | le it with this form.                               |          |                  |                |                                   |           |                       |

Case 2:18-bk-57992 Doc 1 Filed 12/22/18 Entered 12/22/18 11:31:23 Desc Main Document Page 48 of 54

Debtor 1 Jaylen D. Littlefield Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 06/01/2018 to 11/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Gaddis & Sons Construction

Income by Month:

| 6 Months Ago: | 06/2018            | \$2,286.42 |
|---------------|--------------------|------------|
| 5 Months Ago: | 07/2018            | \$2,054.84 |
| 4 Months Ago: | 08/2018            | \$1,814.61 |
| 3 Months Ago: | 09/2018            | \$636.57   |
| 2 Months Ago: | 10/2018            | \$0.00     |
| Last Month:   | 11/2018            | \$0.00     |
|               | Average per month: | \$1,132.07 |

Line 10 - Income from all other sources

Source of Income: GI Bill

Constant income of \$840.50 per month.

Line 10 - Income from all other sources Source of Income: Military Disability Constant income of \$1,932.68 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7                                    | <b>7</b> : | Liquidation        |
|--|------------|--------------------|
| \$   | 245        | filing fee         |
| ;  | \$75       | administrative fee |
| <u>+                                    </u> | \$15       | trustee surcharge  |
| \$   | 335        | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Aarons Rental 5025 West Broad Street□□ □□ Columbus, OH 43228

Capital One P.O. Box 30281 Salt Lake City, UT 84130

City of Canal Winchester Dept. Tax Compliance Division P.O. Box 182402 Columbus, OH 43218

Credit Plus 31550 Winterplace Salisbury, MD 21804

Direct TV P.O. Box 78626 Phoenix, AZ 85062

Grant Medical Center P.O. Box 183221 Columbus, OH 43218

Harris Originals 800 Prime Pl. Hauppauge, NY 11788

Insight Pest/Coast to Coast 101 Hodencamp Rd. 120 Thousand Oaks, CA 91360

IRS- Bankruptcy Division P.O. Box 7346 Philadelphia, PA 19101-7346

Navy Federal 820 Follin Ln. Vienna, VA 22180

Navy Federal C.U. 1 Security Pl. Merrifield, VA 22116

Navy Federal Credit Union 1 Security Pl. Merrifield, VA 22116

Ohio Health 5350 Frantz Rd. Dublin, OH 43016 One Main 6801 Colwell Blvd. Irving, TX 75039

Pay Pal 2211 N First St□□ Gifford, WA 99131

State of Ohio Dept. of Tax 30 E. Broad St., 17th Fl. Columbus, OH 43215

U.S. Dept. Ed/Nelnet 3015 Parker Rd. 400 Aurora, CO 80014

U.S. Dept. Edu P.O. Box 5609 Greenville, TX 75403

US Bank 4325 17th Ave. SW Fargo, ND 58125

Village Capital Investments 1 Corporate Dr. 360 Lake Zurich, IL 60047

Vivint Inc 4931 North 300 W. Provo, UT 84604

Walmart/Syncb P.O. Box 965024 Orlando, FL 32896